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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FEE TRANSMITTAL For FY 2008</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p> <table> <tr> <td>Application Number</td> <td>10/001,245-Conf. #9286</td> </tr> <tr> <td>Filing Date</td> <td>November 15, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Jens Holm</td> </tr> <tr> <td>Examiner Name</td> <td>N. M. Rooney</td> </tr> <tr> <td>Art Unit</td> <td>1644</td> </tr> <tr> <td>Attorney Docket No.</td> <td>04305/100H942-US2</td> </tr> </table>		Application Number	10/001,245-Conf. #9286	Filing Date	November 15, 2001	First Named Inventor	Jens Holm	Examiner Name	N. M. Rooney	Art Unit	1644	Attorney Docket No.	04305/100H942-US2
Application Number	10/001,245-Conf. #9286														
Filing Date	November 15, 2001														
First Named Inventor	Jens Holm														
Examiner Name	N. M. Rooney														
Art Unit	1644														
Attorney Docket No.	04305/100H942-US2														
<p>TOTAL AMOUNT OF PAYMENT</p>		<p>(\$)</p> <p>2,230.00</p>													

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>			
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>				
Utility		310		155		510	255	210	105	
Design		210		105		100	50	130	65	
Plant		210		105		310	155	160	80	
Reissue		310		155		510	255	620	310	
Provisional		210		105		0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues) 50 25

Each independent claim over 3 (including Reissues) 210 105

Multiple dependent claims 370 185

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

Multiple Dependent Claims

HP = highest number of total claims paid for, if greater than 20.

HR = highest number of independent claims paid for, if greater than 3

3 APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = /50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification: \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1255 Extension for response within fifth month 2,230.00

SUBMITTED BY

SUBMITTED BY _____ / (Signature) _____ / REGISTRATION NO. _____

nature /Mitchell Bernstein/ (Attorney/Agent) 46,550

SUBMITTED BY				
Signature	/Mitchell Bernstein/	Registration No. (Attorney/Agent)	46,550	Telephone (212) 527-7700
Name (Print/Type)	Mitchell Bernstein		Date	July 9, 2008